

IN THE IOWA DISTRICT COURT FOR POLK COUNTY

IN THE INTEREST OF

DEPENDENT ADULT

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PROBATE NO. GC\_\_\_\_\_

**PETITION FOR EMERGENCY ORDER AND  
FOR ORDER ENJOINING THIRD PARTIES  
PURSUANT TO IOWA CODE SECTION  
235B.19**

COMES NOW, the Iowa Department of Human Services for Polk County and pursuant to Iowa Code §235B.19(7), requests the Court enter an Emergency Order authorizing the provision of protective/medical services to DEPENDENT ADULT and an order enjoining (NAME OF PERPETRATOR) and in support states:

1. DEPENDENT ADULT, DOB: \_\_\_\_\_, residing at \_\_\_\_\_, is a dependent adult as defined in Iowa Code §235B.2(4).
2. The above dependent adult has been subjected to dependent adult abuse, as defined in Iowa Code Section 235B.2(5), and is in need of the following services and/or injunctive relief:

DEPENDENT ADULT shall be transported to a hospital as designated by DHS for medical evaluation and shall be admitted if recommended by the treating medical providers. When discharged, DEPENDENT ADULT shall be placed as determined by DHS in consultation with the treating medical providers. All medical decisions to be made by the treating medical providers.

(NAME OF PERPETRATOR) should be enjoined from engaging in the following:

- a. Withdrawing funds from any bank, savings and loan association, credit union, or other financial institution, or from a stock account in which the dependent adult has an interest.

- b. Negotiating any instruments payable to the dependent adult.
- c. Selling, mortgaging, or otherwise encumbering any interest that the dependent adult has in real property.
- d. Exercising any powers on behalf of the dependent adult through representatives of the department, any court-appointed guardian or guardian ad litem, or any official acting on the dependent adult's behalf.
- e. Engaging in any other specified act which, based upon the facts alleged, would constitute harm or a threat of imminent harm to the dependent adult or would cause damage to or the loss of the dependent adult's property.
- f. Removing the dependent adult from the care or custody of another.
- g. Committing dependent adult abuse on the dependent adult.
- h. Living at the dependent adult's residence or entering the property where the dependent adult resides, or arranging for third parties to so act on their behalf without Court authorization.

All financial accounts in the name of DEPENDENT ADULT shall immediately be frozen.

3. The undersigned Department of Human Services Adult Protective Worker states the following in support of the petition:

<<<<insert info from affidavit>>>

WHEREFORE, it is requested that the Court, pursuant to Iowa Code Section 235.19, enter an Order providing protective and medical services to the dependent adult and an order which

would enjoin Bryan and Kerri Williams and that such Order remain in effect until further notice by the Court and/or until a hearing is held addressing this matter.

Dated this 15 June 2015.

Respectfully submitted,

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Celene Gogerty AT0002830  
Assistant Polk County Attorney  
Polk County Attorney's Office  
206 6<sup>th</sup> Ave., 3<sup>rd</sup> Floor  
Des Moines, Iowa 50309  
(515) 286-3417  
(515) 323-5251 Fax

I have read this Petition for Emergency Order and verify that it is true and correct.

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Polk County Department of Human Services

Sworn and subscribed to before me June 15, 2015 by the above-signed Department of Human Services Worker.

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Notary Public in and for the State of Iowa

Original Filed

Copies to:  
Dependent Adult DEPENDENT ADULT  
Asst. County Atty. Celene Gogerty  
Attorney for Dep. Adult  
GAL for Dep. Adult  
DHS  
Law Enforcement Agency  
Party to be Enjoined

IN THE IOWA DISTRICT COURT FOR POLK COUNTY

IN THE INTEREST OF

DEPENDENT ADULT

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PROBATE NO. GC \_\_\_\_\_

**EMERGENCY ORDER AUTHORIZING  
PROTECTIVE/MEDICAL SERVICES UNDER  
IOWA CODE SECTION 235B.19**

Now on this 15 June 2015, the Court, having been presented with a Petition for Emergency Order Authorizing Protective/Medical Services pursuant to Iowa Code Section 235B.19, **FINDS** there is probable cause to believe that dependent adult abuse presents an immediate threat to the health or safety of, or irreparable harm to the physical or financial resources of, DEPENDENT ADULT, DOB: \_\_\_\_\_, currently residing at \_\_\_\_\_, a dependent adult, and that DEPENDENT ADULT lacks the capacity to consent to the receipt of such protective/medical services and there is no one available to consent to such services.

As a result of the above finding, pursuant to Iowa Code Section 235B.19(3), (4) the **COURT ORDERS** the following:

DEPENDENT ADULT shall be transported to a hospital as designated by DHS for medical evaluation and shall be admitted if recommended by the treating medical providers. When discharged, DEPENDENT ADULT shall be placed as determined by DHS in consultation with the treating medical providers. All medical decisions shall be made by the treating medical providers.

Pursuant to Iowa Code Section 235B.19(3)(c) an Officer with the City of Des Moines Police Department and, if needed, Emergency Services Personnel, is **ORDERED** to accompany a representative from the Iowa Dept. of Human Services and to assist in any manner reasonably necessary to carry out the provisions of this Order.

Any and all Fees associated with the filing of this Order and/or any prior Petition are **WAIVED**.

Pursuant to Iowa Code Section 235B.19(5), this Order expires at the end of 72 hours from when issued, unless the 72<sup>nd</sup> hour ends on a Saturday, Sunday, or Legal Holiday, and in such event this Order expires at 4:00 PM on the first succeeding business day.

It is further **ORDERED** that, pursuant to Iowa Code Section 235B.3(9)(c),  
\_\_\_\_\_ is appointed as Attorney and Guardian ad  
Litem for DEPENDENT ADULT at Polk County Expense.

It is further **ORDERED** pursuant to Iowa Code Section 22.7 that all exhibits entered with regard to the above-titled petition are **CONFIDENTIAL**. The Clerk of Court is ordered to **SEAL** all such exhibits and they shall not be accessed without a Court order. These documents shall be kept in the court file sealed in a separate envelope.

**SO ORDERED**

\_\_\_\_\_  
RUTH B. KLOTZ  
JUDGE, 5th JUDICIAL DISTRICT

Original Filed

Copies to:  
Dependent Adult DEPENDENT ADULT  
Asst. County Atty. Celene Gogerty  
Attorney for Dep. Adult  
GAL for Dep. Adult  
DHS  
Law Enforcement Agency  
Service Provider

IN THE IOWA DISTRICT COURT FOR POLK COUNTY

IN THE INTEREST OF

DEPENDENT ADULT

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PROBATE NO. GC \_\_\_\_\_

**ORDER ENJOINING THIRD PARTIES  
PURSUANT TO IOWA CODE SECTION  
235B.19(7)**

Now, on this 15 June 2015, the Court, having been presented with a Petition for Order Enjoining Third Parties Pursuant to Iowa Code Section 235B.19(7), **FINDS** by probable cause that dependent adult abuse has occurred and is either ongoing or likely to reoccur and that DEPENDENT ADULT, DOB: \_\_\_\_\_, is a dependent adult who is in need of protective (injunctive) services as specified in the Petition and that the dependent adult lacks the capacity to consent to the receipt of such protective (injunctive) services and such consent cannot be obtained.

The Court **ORDERS** that pursuant to Iowa Code §235B.19(7)(a), (j), NAME OF PERPETRATOR, shall be enjoined as follows:

- a. Withdrawing funds from any bank, savings and loan association, credit union, or other financial institution, or from a stock account in which the dependent adult has an interest.
- b. Negotiating any instruments payable to the dependent adult.
- c. Selling, mortgaging, or otherwise encumbering any interest that the dependent adult has in real property.
- e. Exercising any powers on behalf of the dependent adult through representatives of the department, any court-appointed guardian or guardian ad litem, or any official acting on the dependent adult's behalf.
- e. Engaging in any other specified act which, based upon the facts alleged, would constitute harm or a threat of imminent harm to the dependent adult or would cause damage to or the loss of the dependent adult's property.
- f. Removing the dependent adult from the care or custody of another.
- g. Committing dependent adult abuse on the dependent adult.
- h. Living at the dependent adult's residence entering the property where the

dependent adult resides, or arranging for third parties to so act on their behalf without Court authorization.

All financial accounts in the name of DEPENDENT ADULT shall immediately be frozen.

This injunction shall be in force and effect until further notice from the Court.

**Failure to comply with this Order may be punishable as contempt pursuant to Iowa Code Chapter 665.**

**SO ORDERED**

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RUTH B. KLOTZ  
JUDGE FOR THE FIFTH JUDICIAL DISTRICT

Original Filed

Copies to:  
Dependent Adult DEPENDENT ADULT  
Asst. County Atty. Celene Gogerty  
Attorney for Dep. Adult  
GAL for Dep. Adult  
DHS  
Law Enforcement Agency  
Party to be Enjoined

GC\_\_\_\_\_

**RETURN OF SERVICE**

I, the undersigned, a law enforcement officer, hereby state that the attached EMERGENCY ORDER AUTHORIZING PROTECTIVE/MEDICAL SERVICES FOR DEPENDENT ADULT and ORDER ENJOINING THIRD PARTIES was served upon NAME OF PERPETRATOR, by personally delivering a copy of said orders to:

NAME OF PERPETRATOR

Service was accomplished at \_\_\_\_\_ **AM/PM** on the \_\_\_\_\_ day of \_\_\_\_\_, 2013,  
At \_\_\_\_\_, **in the city of** \_\_\_\_\_ in  
\_\_\_\_\_ County, Iowa.

\_\_\_\_\_  
Name: \_\_\_\_\_  
Agency: \_\_\_\_\_



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PROBATE NO. GC\_\_\_\_\_

**CONFIDENTIAL SOCIAL SECURITY  
NUMBER FORM**

Please note: This form is for the submission of social security numbers **ONLY**. Dates of birth and employer identification numbers are not confidential and should appear on the heading or face of the petition, answer, etc. Please print or type all information.

<u>Name</u>	<u>Social Security Number</u>	<u>DOB</u>
Ward: DEPENDENT ADULT		

Information supplied by \_\_\_\_\_, Department of Human Services

Signature: \_\_\_\_\_ Date June 15, 2015